

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SMX		1/2/90
O.I.P.E. CLASSIFIER		12	1/12/90
FORMALITY REVIEW	RF	70556	2-4-00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
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1-503 U.S. PTO

For  
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